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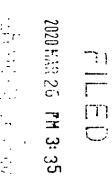
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone #	()
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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Amend

APR 0.8 2020
I ALBRITTON

COVER LETTER

	gistration Se vision of Cor					
CHD IFCT.		FIC INVESTMENT, LLC				
SUBJECT:Name of Limited Liability Company						
The enclose	d Articles of	Amendment and fee(s) are sub	bmitted for filing.			
Please return	n all correspo	ondence concerning this matter	r to the following:			
		MICHAEL MELENDEZ				
			Name of Person			
		MELENDEZ VEGA, LLO	С			
		 	Firm/Company			
		7500 NW 25TH STREET	SUITE 105			
			Address			
		MAIMI, FL 33122				
			City/State and Zip Code			
		MICHAEL@MELENDEZ				
			(to be used for future annual report notification)			
For further i	nformation c	oncerning this matter, please c	call:			
MICHAEL	MELENDEZ	2	305 271-5841			
	Name o	f Person	Area Code Daytime Telephone Number	-		
Enclosed is	a check for th	ne following amount:				
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fe Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fe Certified Copy (additional copy is	tatus &		
Re	iling Address	Section	Street Address: Registration Section			
	vision of C D. Box 632	orporations 7	Division of Corporations The Centre of Tallahassee			
	llahassee, F		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIBI PACIFIC INVESTMENT, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{01/23/2020}{1}$ and assigned Florida document number $\frac{1.20000029527}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the play registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	UNDURRAGA BULNES, MARIA J	1610 SW 14 ST	■Add
		MIAMI, FI. 33145	□Remove
			□Change
			□Add
			ПRетюче
			□Change
			□Add
			□ Петьоче
			□Change
			Renkove
		□Change	
			🗖 Add
		□Remove	
			□ Change
			□Add
			Пенюve
			□ Change

e date, if other than the date of filing:
specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Massur
March 16 2020
Maria 5. de Musicelles

Typed or printed name of signee